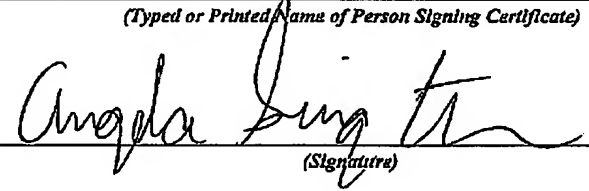


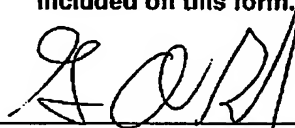

OCT 11 2006

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 030392 / BLL-0126	
Applicant(s): Samuel Zellner				
Application No. 10/713,939	Filing Date November 13, 2003	Examiner Charles T. Shedrick	Group Art Unit 2617	
Invention: A METHOD, SYSTEM, AND STORAGE MEDIUM FOR PROVIDING COMPREHENSIVE ORIGINATOR IDENTIFICATION SERVICES				
<p>I hereby certify that this <u>Amendment Transmittal (1 pg) & Amendment (18 pgs)</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)</p> <p>on <u>October 11, 2006</u> (Date)</p> <p><u>Angela Singleton</u> (Typed or Printed Name of Person Signing Certificate)</p> <p> (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>				

P18/REV02

BEST AVAILABLE COPY

OCT 11 2006

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 030392 / BLL-0126	
Applicant(s): Samuel Zellner						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/713,939	November 13, 2003	Charles T. Shedrick	36192	2617	4821	
Invention: A METHOD, SYSTEM, AND STORAGE MEDIUM FOR PROVIDING COMPREHENSIVE ORIGINATOR IDENTIFICATION SERVICES						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	22 -	23 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: October 11, 2006			
Greg O'Bradovich Registration No. 42,945 Customer No. 36192 Telephone: (404) 607-9991			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on October 11, 2006 (Date)  Signature of Person Mailing Correspondence Via Facsimile By Angela Singleton Typed or Printed Name of Person Mailing Correspondence			
CC:						

P11LARGE/REV10

OCT 11 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Samuel Zellner)
Serial No.: 10/713,939) Group Art Unit: 2617
Filed: November 13, 2003) Examiner: Charles T. Shedrick
For: A METHOD, SYSTEM, AND STORAGE) Confirmation No: 4821
MEDIUM FOR PROVIDING)
COMPREHENSIVE ORIGINATOR)
IDENTIFICATION SERVICES)

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In response to the Office Action dated July 12, 2006, the Applicants submit the following amendment and remarks for entry in the above-entitled application.

030392 / BLL-0126

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